

## Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area. Page # 1 of 3

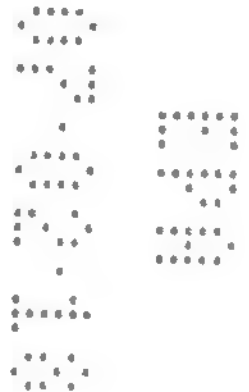
Row 1	Reporter name: [REDACTED]	Submission date:	Contact person (if different than reporter)	Internal ID 1-52431760
Administrative Data	Address:  Texas		Address:	
	Phone #: [REDACTED]		Phone #:	
	Incident Status:  New	Location and date of incident Texas 05/17/2018	Date registrant became aware of incident: 5/17/2018	Was incident part of larger study?
Row 2	EPA Registration # (Product 1)  228-509-59144	EPA Registration # (Product 2)	EPA Registration # (Product 3)	
Pesticide(s) Involved	A.I. (s)  Glyphosate, Prodiamine	A.I. (s)	A.I. (s)	
	Product 1 Name  Eliminator Extreme Weed & Grass Killer Concentrate Plus Preventer (EPA 228-509-59144)	Product 2 Name	Product 3 Name	
	Exposed to concentrate prior to dilution? NA	Exposed to concentrate prior to dilution?	Exposed to concentrate prior to dilution?	
	Formulation	Formulation	Formulation	
Row 3	Evidence label directions were not followed? No Intentional misuse? No	Incident site: (examples include home, yard, school, industrial, nursery/greenhouse, surface water, commercial turf, building/office, forest/ woods, agricultural (specify crop) right-of-way (rail, utility, highway))  Own Residence	Situation: (act of using product): (examples include mixing/loading, reentry, application, transportation, repair/maintenance of application equipment, manufacturing/ formulating)  See Description Notes	
Incident Circumstances	Applicator certified PCO? Not applicable			
	How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff)  See Incident Description			

*5/17/2018 6:41:25 PM Eliminator Extreme Weed & Grass Killer Concentrate Plus Preventer  
UPC: 21495-01853*

*HX: Caller states that he was using this product over the last few hours. He has just begun to develop skin irritation and some welts on his arms and legs. Caller does believe that there was some back spray that could have gotten onto him while he was spraying it.*

*A: - Skin exposure may cause a burning, itching, tingling, or numbness sensation.  
- Symptoms typically develop soon after the exposure and resolve spontaneously within 24 hours.  
- Remove contaminated clothing and rinse exposed skin with running water for at least 20 minutes.  
- If symptoms develop, you may apply a light coating of Vitamin E oil every four hours as needed. Vitamin E oil may help reduce the intensity and duration of the sensation.  
- Consult a health care professional if symptoms persist for more than 24 hours.  
- Please call back with any additional questions or concerns.*

*5/21/2018 10:47:48 AM Called back, left message on voice mail asking for return call and follow-up information.*



# Voluntary Industry Reporting Form for 6(a)(2) Incident Information Involving Humans

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area. Page # 3 of 3

Demographic information Age: <i>Unknown Adult (18-64)</i> Sex: <i>Male</i> Occupation: (if relevant)	Exposure route: <i>Dermal</i>	Was adverse effect result of suicide/homicide or attempted suicide/homicide? <i>No</i>	Was protective clothing worn (specify)?  <i>Not applicable</i>
If female, pregnant? <i>Did not query</i>	Was exposure occupational? <i>No</i> If yes, days lost due to illness:	Time between exposure and onset of symptoms: <i>See Symptoms</i>	
Type of medical care sought: (examples include none, clinic, hospital emergency department, private physician, PCC, hospital inpatient). <i>On-site</i>	List signs/symptoms/adverse effects.  <i>Dermal Irritation, 60 min or less;</i> <i>Hives/Welts, 60 min or less;</i>		If lab tests were performed, list test names and results (If available, submit reports).  <i>Not Reported</i>
Exposure data: Amount of pesticide: Exposure duration: Weight:			
Human severity category: <i>HC</i>			

This box can be used to provide any explanatory or qualifying information surrounding the incident. (add additional pages if necessary)

Internal ID #  
*1-52431760*